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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<b>Attorney Docket No.</b> 03880- P0001B	
		<b>First Inventor</b> David F. Davenport et al.	
		<b>Title</b> Method and Nutraceuatical Composition for Mammals	
		<b>Express Mail Label No.</b> EL 550 092 839 US	

  

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents</small>	<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																				
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Applicant claims small entity status <small>See 37 CFR 1.27.</small> 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>43</u> ] <small>(preferred arrangement set forth below)</small> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claims(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawings(s) (35 USC 113) [Total Sheets <u>4</u> ] 5. Oath or Declaration [Total Sheets <u>0</u> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventors(s)          named in the prior application, see 37 CFR          1.63(d)(2) and 1.33(b).</small> 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Form (CRF) b.: Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies <b>ACCOMPANYING APPLICATION PARTS</b> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee)</small> Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Nonpublication Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 of its equivalent. 17. <input type="checkbox"/> Other.....																				
18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <small>Prior application information: Examiner Group/Art Unit:</small> <b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.																					
<b>18. CORRESPONDENCE ADDRESS</b>																					
<input checked="" type="checkbox"/> Customer Number: <span style="border: 1px solid black; padding: 2px 20px;">24126</span> <span style="float: right;">OR <input checked="" type="checkbox"/> Correspondence address below</span>																					
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="4"><b>Name</b> Michael W. Krenicky, Esq.</td> </tr> <tr> <td colspan="4"><b>Address</b> St. Onge Steward Johnston &amp; Reens LLC</td> </tr> <tr> <td colspan="4">986 Bedford Street</td> </tr> <tr> <td><b>City</b> Stamford</td> <td><b>State</b> CT</td> <td><b>Zip Code</b> 06905-5619</td> <td></td> </tr> <tr> <td><b>Country</b> United States</td> <td><b>Telephone</b> 203 324-6155</td> <td><b>Fax</b> 203 327-1096</td> <td></td> </tr> </table>		<b>Name</b> Michael W. Krenicky, Esq.				<b>Address</b> St. Onge Steward Johnston & Reens LLC				986 Bedford Street				<b>City</b> Stamford	<b>State</b> CT	<b>Zip Code</b> 06905-5619		<b>Country</b> United States	<b>Telephone</b> 203 324-6155	<b>Fax</b> 203 327-1096	
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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><b>Name (Print/Type)</b> Michael W. Krenicky</td> <td><b>Registration No. (Attorney/Agent)</b> 45,411</td> </tr> <tr> <td><b>Signature</b> <i>Michael Krenicky</i></td> <td><b>Date</b> 10/23/03</td> </tr> </table>		<b>Name (Print/Type)</b> Michael W. Krenicky	<b>Registration No. (Attorney/Agent)</b> 45,411	<b>Signature</b> <i>Michael Krenicky</i>	<b>Date</b> 10/23/03																
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This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 ND 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231-1450.

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 17548 U.S. PTO  
 10/692064


10/23/03

**FEE TRANSMITTAL  
for FY 2003**

Effective 01/01/2003. Patent fees are subject to annual revision

☒ Applicant claims small entity status, See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT**

(\$ 825.00)

**Complete if Known**

Application No.

- Pending

Filing Date

October 23, 2003

First Named Inventor

Davenport et al.

Examiner Name

Art Unit

Attorney Docket Number

03880-P0001B WWW/MWK

**METHOD OF PAYMENT (check all that apply)**☒ Check ☐ Credit Card ☐ Money ☐ Other ☐ None  
☒ Deposit Account: orderDeposit  
Account

19-4516

Deposit  
Account  
Name

St. Onge Steward Johnston &amp; Reens LLC

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fees(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1101	770	2001	385	Utility filing fee	385.00
1002	340	2202	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					385.00

**2. EXTRA CLAIMS FEES FOR UTILITY AND REISSUE**

Total Claims		Extra Claims		Fee from below		Fee Paid
45	-20**	25	X	9	=	225.00
8	-3**	5	X	43	=	215.00
Multiple Dependent						

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1201	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claims, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 over original patent	
SUBTOTAL (2)					440.00

\*\* or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing for or oath	
1052	50	2052	25	Surcharge - late provisional filing or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	40	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** (\$ 0.00)**SUBMITTED BY** St. Onge Steward Johnston & Reens LLC

Name (Print/Type)

Michael W. Krenicky

Registration No  
(Attorney/Agent)

45,411

Telephone

203 324-6155

Signature

Date

10/23/2003

WARNING: Information on this form may become public. Credit card information should not be included on this form.  
Provide credit card information and authorization on PTO-2038

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